

## VERIFICATION

STATE OF CALIFORNIA, COUNTY OF \_\_\_\_\_

I have read the foregoing \_\_\_\_\_ and know its contents.

☒ CHECK THE APPLICABLE PARAGRAPH

☐ I am a party to this action. The matters stated in the foregoing document are true of my own knowledge except as to those matters which are stated on information and belief, and as to those matters, I believe them to be true.

☐ I am ☐ an Officer ☐ a partner \_\_\_\_\_ ☐ a \_\_\_\_\_ of \_\_\_\_\_, a party to this action, and am authorized to make this verification for and on its behalf, and make this verification for that reason. ☐ I am informed and believe and on that ground allege that the matters stated in the foregoing document are true. ☐ The matters stated in the foregoing document are true of my own knowledge except as to those matters which are stated on information and belief, and as to those matters, I believe them to be true.

☐ I am one of the attorneys for \_\_\_\_\_, a party to this action. Such party is absent from the county of aforesaid where such attorneys have their offices, and I make this verification for and on behalf of that party for that reason. I am informed and believed and on that ground allege that the matters stated in the foregoing document are true.

Executed on \_\_\_\_\_, 20\_\_\_\_\_, at \_\_\_\_\_, California.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

\_\_\_\_\_  
Type or Print Name

\_\_\_\_\_  
Signature

## PROOF OF SERVICE

STATE OF CALIFORNIA, COUNTY OF \_\_\_\_\_

I am employed in the County of \_\_\_\_\_, State of California.

I am over the age of 18 and not a party to the within action. My business address is: \_\_\_\_\_

On \_\_\_\_\_, 20\_\_\_\_\_. I served the foregoing document described as \_\_\_\_\_

\_\_\_\_\_ on \_\_\_\_\_ in this action

☐ by placing the true copies thereof enclosed in sealed envelopes addressed as stated on the attached mailing list:

☐ by placing ☐ the original ☐ a true copy thereof enclosed in sealed envelopes addressed as follows:

☐ BY MAIL \*

☐ I deposited such envelope in the mail at \_\_\_\_\_, California.

The envelope was mailed with postage thereon fully prepaid.

☐ As follows: I am "readily familiar" with the firm's practice of collection and processing correspondence for mailing. Under that practice it would be deposited with the United States Postal Service on that same day with postage thereon fully prepaid at \_\_\_\_\_, California in the ordinary course of business. I am aware that on motion of the party served, service is presumed invalid if postal cancellation date or postage meter date is more than one day after the date of deposit for mailing in affidavit.

Executed on \_\_\_\_\_, 20\_\_\_\_\_, at \_\_\_\_\_, California.

☐ BY PERSONAL SERVICE \*\*

I delivered such envelope by hand to the offices of the addressee.

Executed on \_\_\_\_\_, 20\_\_\_\_\_, at \_\_\_\_\_, California.

☐ (State) I declare under penalty of perjury under the laws of the State of California that the above is true and correct.

☐ (Federal) I declare that I am employed in the office of a member of the bar of this court at whose direction the service was made.

\_\_\_\_\_  
Type or Print Name

\_\_\_\_\_  
Signature

\* BY MAIL: SIGNATURE MUST BE OF PERSON DEPOSITING ENVELOPE BY MAIL  
SLOT BOX OR BAG.

\*\* BY PERSONAL SERVICE: SIGNATURE MUST BE THAT OF MESSENGER.